

SAINT XAVIER UNIVERSITY GRADUATE STUDENT HOUSING CONTRACT 2017-2018

NAME _____

STUDENT ID # _____ BIRTHDATE _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT PHONE NUMBER _____

EMERGENCY CONTACT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT PHONE NUMBER _____

Have you ever been convicted of a crime? ___YES ___NO

Have you ever been subject to major discipline at a prior institution? ___YES ___NO
(If yes, please explain in detail on a separate sheet of paper and submit with your contract.)

START TERM: FALL _____ SPRING _____ 20 _____

PLEASE INDICATE YOUR STUDENT & PROGRAM STATUS

Graduate Program _____

TRANSFER HOUSING PREFERENCE (Rank 1, 2)

UNIVERSITY APARTMENTS (1 BR- single occupancy)

UNIVERSITY APARTMENTS (2BR - one roommate)

COMPLETE IF SELECTING A 2BR APARTMENT:

When do you go to sleep at night?

Turn in before midnight

Turn in after midnight

My living space is typically described as:

Lived in and casual

Neat and organized

Which best describes you*?

Smoker Non-smoker

*All SXU apartment units are smoke-free

Which best describes your personal interests?

Athletic Artistic Studious

Which best describes your personality?

Extrovert, has large group of friends

Introvert, close group of friends

Would you prefer to live with someone who has the same interests as yourself?

Yes No

Do you have a specific roommate request? Yes No

If yes, please list their first and last name _____

Rates & Billing Schedule:

1 BR Unit: \$10,680 ANNUALLY

2 BR Unit: \$8,580 ANNUALLY

50 WEEK CONTRACT: AUG 15- JULY 31

FALL TERM BILLING: WEEKS 1-24 (1BR \$5,240; 2BR \$4,210)

SPRING TERM BILLING: WEEKS 25-50 (1BR \$5,240; 2BR \$4,210)

Meal Plan- declining balance plan. Additional information is available online at www.sxu.edu Keyword: Housing.

BRONZE: \$1,600/per semester (minimum meal plan for Graduate Student residents)

Provides infrequent full meal dining with flexibility for snacks and grab and go items.

I agree to pay Saint Xavier University the graduate student room and board charges as noted on the Residence Life website. I understand these rates are subject to change and I will be responsible for paying the rate for the contract term in which I will be attending Saint Xavier University. I have read the University Housing Contract terms and conditions stated on the reverse side of this contract and agree to the terms and conditions of occupancy. I hereby certify that the facts set forth in this document are true, and I understand that any falsified statements will result in denial or termination of residency.

Student's Signature

Date

Director of Residence Life

Date

FOR OFFICE USE ONLY:

ROOM TYPE: 1 BDRM 2BDRM MEAL PLAN: BRONZE

UA: RIV APT #: